

**NURSERY REGISTRATION FORM**

Child's Personal Details

Child's surname ..... Child's first name .....

Child's full name as detailed on birth certificate .....

Gender: Male / Female ..... Date of birth ..... Age .....

Address: .....

Post Code .....

Nationality ..... Ethnic Origin ..... Language(s) Spoken .....

Full name of person(s) with parental responsibility: Please print and complete all details requested

Carer 1: Full name ..... Relationship to child .....

Date of Birth ..... National Insurance Number .....

Benefits received .....

Address (if different from above) Telephone Number .....

Carer 2: Full name ..... Relationship to child .....

Date of Birth ..... National Insurance Number .....

Benefits received .....

Address (if different from above) Telephone Number .....

Do you prefer morning sessions: 9:00-12:00 Yes/No

Do you prefer afternoon sessions: 1:00-4:00 Yes/No

Do you required additional childcare hours Yes/No

Places may be limited so please return this form immediately to nursery in order to secure your place on the waiting list. Please sign below to authorise Wonder Tots Day Cate Ltd to carry our an eligibility check on your behalf.

Signature: .....

Date received by nursery ..... Signed .....

Additional Information: